

Policy and Procedure Register updates

Summary of changes to:

Workplace rehabilitation procedure

1. Reason for new/updated policy or procedure <i>(select all that apply)</i>		
<input type="checkbox"/> Change of policy/procedure requirements	<input checked="" type="checkbox"/> Audit/review recommendation	
<input type="checkbox"/> Change to legislation/delegations	<input checked="" type="checkbox"/> Due for review	<input type="checkbox"/> Other
<p>As a part of our ongoing commitment to continuously improve our approach to workplace health, safety and wellbeing, the Department of Education completed a review of the <i>Workplace Rehabilitation Procedure</i>.</p> <p>Outcomes of this review ensure our processes remain aligned with our obligations under the <i>Work Health and Safety Act 2011</i> (Qld) and <i>Workers' Compensation and Rehabilitation Act 2003</i> (Qld) as well as associated regulations. It also supports the department's commitment to reducing red tape and simplifying administrative processes.</p> <p>Updates to the procedure will help to improve the experience for our staff and leaders, while also contributing to our focus to reduce premium and indirect costs associated with workplace injury and illness.</p>		
2. Summary of changes		
<p>The procedure has been redesigned to provide a shorter list of consolidated responsibilities and a step-by-step process for our stakeholders. A new high-level process map of the rehabilitation process has been included as a visual aid to assist stakeholder understanding. Several supporting documents in the current procedure were identified as obsolete and have been removed. Consolidating and simplifying these materials will ensure our information is clear, current and practical, enabling consistent and effective injury management across the department.</p>		
3. Impacts to roles and responsibilities		
Does the new/updated content change staff roles/responsibilities <i>in any way?</i>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<i>If yes, select the type of change: (select all that apply)</i>		
<input checked="" type="checkbox"/> Revised responsibilities	<input type="checkbox"/> New/additional responsibilities	<input type="checkbox"/> Removed responsibilities
Position title	Summary of change	Page#
Injured/ill employees	Shorter consolidated list of responsibilities.	2
Principals, managers and supervisors	Shorter consolidated list of responsibilities.	2
Rehabilitation and return to work coordinators	Shorter consolidated list of responsibilities.	3
Senior injury management consultants	Shorter consolidated list of responsibilities.	3

Regional and central office human resource teams	Shorter consolidated list of responsibilities.	3
4. Communication and support for implementation		
<p>Communications to staff will be distributed through Director-General messages, school Health, Safety and Wellbeing Committee packs and regional Human Resource teams.</p> <p>Content in Mandatory All Staff Training, Management Foundations, and Rehabilitation and Return to Work Coordinator online courses will be updated.</p>		
<p>For further assistance, please contact:</p> <ul style="list-style-type: none"> • External consultation contact: Emma Hayes Health, Safety and Wellbeing unit injurymanagement@ged.qld.gov.au • Policy/procedure contact: Emma Hayes Health, Safety and Wellbeing unit injurymanagement@ged.qld.gov.au 		



Procedure

Workplace rehabilitation procedure

Version: 5.0 | Version effective: 20/04/2026

Audience

Department-wide

Purpose

This procedure outlines how the Department of Education (the department) may assist employees to return to work following either a work-related or non-work-related injury or illness.

Overview

Workplace rehabilitation is a process that guides and supports an employee's recovery and safe return to work after sustaining an injury or illness. The rehabilitation process is a collaborative process that considers the individual needs of each employee and the employee's current medical information, their recovery timeframes, and appropriate opportunities for a safe return to work.

This process may include a rehabilitation plan encompassing time off work, a graduated return to work plan, temporary workplace adjustments or other pathways to return an employee to work, where safe and reasonably practical within the operational needs of the workplace. Both physical and psychosocial hazards in the workplace must be considered during rehabilitation and return to work planning and implementation. This procedure aligns with respective Codes of Practice, [How to manage work health and safety risks](#) and [Managing psychosocial hazards at work](#).

Rehabilitation is guided by medical information and considers the holistic health circumstances for each employee as they recover from injury/illness. This includes considering employee needs related to disabilities and chronic health conditions.

The department is committed to ensuring employees participating in a rehabilitation process are treated with respect and reasonableness and that their confidentiality is maintained.

Workplace rehabilitation is provided as a priority to employees with a current accepted workers' compensation claim as per section 228 of the [Workers' Compensation and Rehabilitation Act 2003 \(Qld\)](#) (the Act). The department may also provide workplace rehabilitation to employees without a current accepted workers' compensation claim to return to work, where this is operationally reasonable.

Responsibilities

Employees

- Report any work-related injury or illness to the principal/manager/supervisor as soon as possible.
- Notify the principal/manager/supervisor of any workplace issues that may be impacting their health, or health issues impacting work performance or attendance, and actively try to resolve these.
- Follow medical advice, participate in rehabilitation and comply with the rehabilitation plan and process.
- Provide medical documentation in a timely manner and sufficiently detailed to confirm medical restrictions for performing work.
- Maintain regular contact with the workplace during their rehabilitation and recovery.
- Apply for leave with supporting evidence, in accordance with the department's [Employee leave procedure](#).
- Provide a [clearance medical certificate](#) and where required, a work capabilities checklist before resuming normal duties, following a period of injury, illness, rehabilitation or absence.

Principals, managers and supervisors

- Ensure employees undergoing rehabilitation have access to a trained Rehabilitation and return to work coordinator (RRTWC).
- Maintain regular contact with injured/ill employees either directly or through an appropriate management representative while the injured/ill employee is on leave from the workplace and during rehabilitation.
- Ensure sufficient time is provided to the RRTWC to complete rehabilitation services with priority placed on accepted workers' compensation claims.
- Manage medical and personal information confidentially.
- Maintain officer in charge case notes, records of meetings, and all incoming and outgoing correspondence in [MyHR Workplace Health and Safety \(MyHR WHS\)](#) (DoE employees only).
- Provide input on workplace impacts and risks for consideration in rehabilitation planning.
- Identify and provide support for appropriate suitable duties and workplace adjustments where operationally reasonable.
- Identify and provide appropriate reasonable adjustments to support an employee with a disability to engage in discussions, e.g. support person, Auslan interpreter.
- Implement their Human Resource delegations to approve leave and take into consideration whether to direct an employee to leave or not attend the workplace due to health and safety concerns.
- Consider human rights when assisting employees to return to work following either a work-related or non-work-related injury or illness and make decisions compatible with the [Human Rights Act 2019 \(Qld\)](#).

Rehabilitation and return to work coordinators (RRTWCs)

- Undertake [appropriate training](#) to ensure relevant skills to perform RRTWC duties.
- Maintain regular contact with injured/ill employees and record all communication or attempted contacts.
- Develop a rehabilitation plan for employees requiring support to return to the workplace.

- Gather and keep rehabilitation records, including medical documentation in [MyHR WHS](#) (DoE employees only).
- Manage medical and personal information confidentially.
- Manage rehabilitation cases in accordance with the [Guidelines for RRTWCs](#) (DoE employees only).
- Consider human rights when developing a rehabilitation plan and make decisions compatible with the [Human Rights Act 2019 \(Qld\)](#).

Senior injury management consultants (SIMC)

- Provide advice and consultancy about workplace rehabilitation processes and workers' compensation claims.
- Maintain records, case notes and all other relevant documents about rehabilitation cases in [MyHR WHS](#) (DoE employees only).
- Identify and engage external rehabilitation services to manage risks and case complexity.
- Manage medical and personal information confidentially.
- Engage key school, regional or central support staff to provide advice to meet the specific support needs of individual employees with a disability, e.g. specific needs of deaf staff or staff with other disability.
- Consider human rights when providing advice regarding employees return to work following either a work-related or non-work-related injury or illness and make decisions compatible with the [Human Rights Act 2019 \(Qld\)](#).

Claims management officers (CMO)

- Ensure accurate and timely processing of leave, pay information, claim records, return to work plans and return to work timesheets for employees undergoing workplace rehabilitation.
- Communicate with key stakeholders (such as schools/work units and insurers).
- Maintain claim records in [MyHR WHS](#) (DoE employees only).
- Manage medical and personal information confidentially.

Regional and central office human resource teams

- Consider and approve the provision of regional funding for rehabilitation additional allocations, with priority provided to accepted workers' compensation claims.
- When requested, provide human resource consultancy and advice.
- Manage personal information confidentially.
- Where required, identify appropriate host workplace placements and transfers to support return to work.
- Consider human rights when assisting employees to return to work following either a work-related or non-work-related injury or illness and make decisions compatible with the [Human Rights Act 2019 \(Qld\)](#).

Process

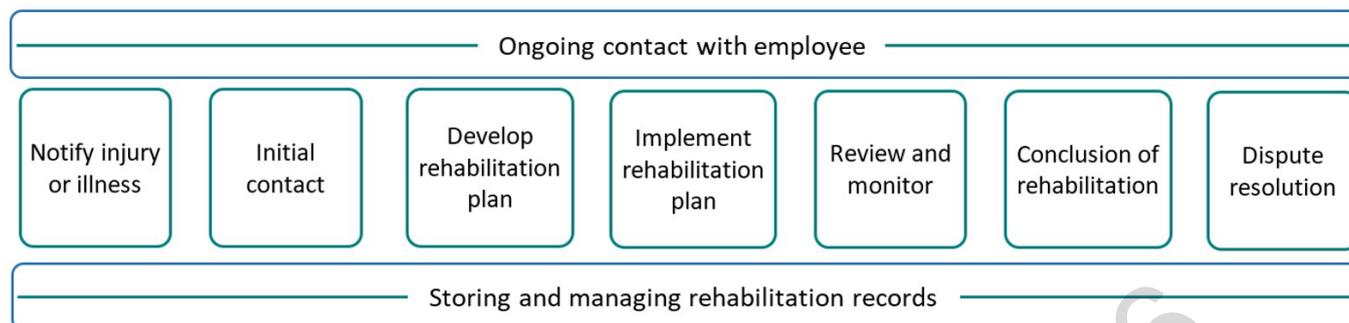


Image 1 – Workplace rehabilitation process steps

All process steps apply for workers' compensation claims. Where the process differs for non-work-related injury or illness, this will be detailed separately.

1. Notification of injury or illness

If the injury/illness is work-related, it must be reported to the principal/manager/supervisor as soon as known in accordance with the [Health, safety and wellbeing incident management procedure](#).

If the work-related injury/illness requires medical treatment or time off work, these additional steps are required:

- The principal/manager/supervisor or RRTWC advises the employee of the workers' compensation claim process, requirements for a Work Capacity Certificate (workers' compensation medical certificate) from their treating medical practitioner and the availability of suitable duties to maintain the employee at work or to return the employee to work when they have capacity. The [Introduction to doctor letter](#) can be provided.
- If an employee wants to make a claim, a workers' compensation claim is to be lodged as soon as possible after the injury occurs. Lodgement may be completed by the employee or the RRTWC in conjunction with the employee either [online or by phoning WorkCover Queensland](#).

For non-work-related injury/illness, if an employee's medical condition or medication could impact their fitness for duty to perform the inherent requirements of their role and/or their attendance at work, or could be potentially aggravated at work, the employee must report this to the principal/manager/supervisor as soon as known.

For both work and non-work-related injury/illness, the following steps must also be taken:

- The principal/manager/supervisor or RRTWC ensures this procedure is implemented as early as possible.
- The principal/manager/supervisor assigns a RRTWC to coordinate rehabilitation for the injured/ill employee. This may be a RRTWC employed at the school/work unit or a RRTWC based at another school/work unit as negotiated.
- The principal/manager/supervisor has a discussion with the employee about the impact of their injury/illness on work. This may result in the employee seeking medical treatment and/or time off work.
- If the injured/ill employee is absent or future absence is expected, the employee is to provide the appropriate medical certification supporting the requested leave and the principal/manager/supervisor is to

consider and appropriately approve leave in accordance with the [Employee leave procedure](#), including consideration of other paid leave types in lieu of sick leave, if sick leave is exhausted.

- If the injured/ill employee has capacity to work, the principal/manager/supervisor or RRTWC discusses return to work options and local workplace interventions that support safe and meaningful work for the injured employee prior to the injured/ill employee's return to work.
- In order to understand the impact of the injury/illness on the employee's capacity to work, to ensure a return to work is safe and to manage potential risk of aggravating injury/illness at work, medical information in the form of a [work capabilities checklist](#) may be requested prior to further consideration of an employee's return to work.
- If the principal/manager/supervisor identifies high risk of self-harm, support the employee in a safe place, advise the need to engage help and connect the employee with appropriate support, e.g. treating doctor, crisis support line or where there is immediate danger call 000.
- If the principal/manager/supervisor determines there are workplace health and safety risks associated with the employee's health that cannot be reasonably controlled, the principal/manager/supervisor can direct an employee to leave or not attend the workplace due to health and safety concerns (refer to [HR Delegations Manual](#)) (DoE employees only)
- The principal/manager/supervisor and RRTWC consider human rights and whether any decisions related to assisting an employee's return to work following either a work-related or non-work-related injury or illness, engages or limits any human rights by examining the following questions:
 - are any human rights engaged or impacted by the decision?
 - if so, will the decision limit those human rights?
 - if so, is the limitation lawful, justified and reasonable in the circumstances?
- The principal/manager/supervisor or RRTWC documents their human rights assessment in case notes or, for more complex cases, completes the [human rights assessment tool](#) (DoE employees only) and saves in MyHR WHS. Refer to [Guidelines for RRTWCs](#) (DoE employees only) for further detail about consideration of human rights impact when developing rehabilitation plans, and implementing and monitoring any activities in the rehabilitation plan.

2. Initial contact

For all injured/ill employees, the RRTWC must:

- Explain the rehabilitation process to the employee and set expectations, including the employee's role, rights, regular contact expectations, options and responsibilities in this process.
- Explore the impact of the employee's injury or illness on their capacity to perform work and identify any work restrictions, workplace health and safety risks or return to work barriers.
- Discuss the resources and supports the department is able to provide the employee, such as work modifications, conflict resolution, [staff wellbeing services](#) (DoE employees only) or the [Employee Assistance Program](#) (DoE employees only).
- Discuss (and request if appropriate) a [Voluntary Medical Authority](#) form in order to directly liaise with the employee's treating medical provider about their medical condition and its impact on work. For further details, refer to [Guidelines for RRTWCs](#) (DoE employees only).

- If the employee is absent from work or future absence is expected:
 - check current medical certification has been provided and advise leave balances and that the appropriate leave application has been made with relevant documentation and approvals.
 - advise the employee of the requirement to provide continuous medical certificates (Work Capacity Certificate for workers' compensation claims) while unfit for work as per the [Sick Leave Directive](#).
- If the employee is absent from work, future absence is expected and/or there are medical restrictions on the work duties the employee can perform while recovering from injury/illness, advise the employee that the primary objective of workplace rehabilitation is to support injured/ill employees to return to the same role and work location
- If the employee is returning to work, a goal focused, time limited rehabilitation plan (maximum 12 weeks) will be developed outlining goals, objectives and steps to recovery.
- If complex health and workplace issues are identified that cannot be resolved through local interventions, the RRTWC refers to the [Early Intervention Program criteria](#) and if it meets criteria, the RRTWC contacts their regional SIMC to discuss a possible referral.

The RRTWC can use the [Initial interview checklist](#) and [Initial interview form](#) to guide their discussion about rehabilitation with the injured/ill employee.

For non-workers' compensation claims, the RRTWC must also discuss:

- income protection insurance (QSuper or other provider) and potential wait periods that may apply (the employee must contact their insurer to confirm access and wait periods).
- rehabilitation support that may be provided to the employee if operationally reasonable. This is based on the medical condition, available rehabilitation resources, workplace risks, organisational priorities and current medical information. The injured/ill employee must be capable of performing a reasonable amount of the inherent requirements of their role and be likely to complete a return to full duties and hours within 12 weeks. The injured/ill employee must also be capable of participating in discussions relevant to performance expectations and conduct of the role. The RRTWC can seek advice from the regional SIMC on reasonable support options.
- whether the employee wants rehabilitation. If the employee declines rehabilitation, but they have been absent from work due to an injury/illness, a clearance medical certificate may be required before they return to the workplace, to ensure health and safety risks are managed. For further details, refer to [Guidelines for RRTWCs](#) (DoE employees only).

3. Develop rehabilitation plan

To determine if workplace rehabilitation is necessary, the RRTWC considers medical information, input from the principal/manager/supervisor on workplace impacts and risks, and information discussed with the injured/ill employee.

A rehabilitation plan is not required if the employee has medical clearance/certificate with no restrictions (treatment only), there are no workplace health and safety risks, or return-to-work barriers, and the employee is performing full duties. In this case, the RRTWC must document their assessment in a case note within [MyHR WHS](#) (DoE employees only).

Rehabilitation plan

This is an overarching plan outlining the rehabilitation goals and objectives, and the steps required to assist the employee to return to work. A rehabilitation plan must be documented for all accepted workers' compensation claims where rehabilitation is required.

The employee provides the RRTWC with current medical documentation (e.g. medical certificate, work capabilities checklist or medical report) outlining the impact of the medical condition on their capacity to perform the requirements of their role. The RRTWC will consult with a SIMC if further information is required from a treating doctor/allied health provider/specialist or an independent specialist to clarify capacity for work and address workplace health and safety risks.

The RRTWC develops the rehabilitation plan and must:

- aim to return the employee to the same job and in the same work location (if this is not possible, refer to the [Guidelines for RRTWCs](#) (DoE employees only) for further detail on the return to work hierarchy).
- ensure the rehabilitation plan is consistent with the current available medical information.
- consult with the injured/ill employee and the manager/principal/supervisor regarding work options, modifications and risks.
- adopt a risk management approach by identifying any potential barriers to return to work, including physical and psychosocial hazards in the workplace. Further information can be found in the Codes of Practice [How to manage work health and safety risks](#) and [managing psychosocial hazards at work](#).
- identify agreed actions to address those barriers and control workplace health and safety risks.
- prioritise rehabilitation case management in line with departmental priorities. Refer to [Guidelines for RRTWCs](#) (DoE employees only) for further detail.
- consider human rights and whether any decisions related to developing the rehabilitation plan engages or limits any human rights by examining the following questions:
 - are any human rights engaged or impacted by the decision?
 - if so, will the decision limit those human rights?
 - if so, is the limitation lawful, justified and reasonable in the circumstances?
- consult with WorkCover or other insurer where relevant.
- document the rehabilitation plan and consultation discussions in [MyHR WHS](#) (DoE employees only). The RRTWC can enter plan details directly into MyHR WHS or use the [rehabilitation plan template](#) or [case note form](#) to upload into MyHR WHS.

The principal/manager/supervisor and RRTWC [documents their human rights assessment](#) in case notes or, for more complex cases, completes the [human rights assessment tool](#) (DoE employees only) and saves in MyHR WHS. Refer to [Guidelines for RRTWCs](#) (DoE employees only) for further detail.

4. Ongoing contact with employee

When the injured/ill employee is absent, the employee must provide appropriate medical certificates and/or information for the full length of absence.

The RRTWC and principal/manager/supervisor must have regular supportive contact with injured/ill employees during their absence, recovery and workplace rehabilitation. Most contact is usually between the RRTWC and the injured/ill employee. The principal/manager/supervisor or an appropriate management representative must have regular contact with injured/ill employees to maintain work relationships and communication channels.

The RRTWC and principal/manager/supervisor must coordinate regular contact with the employee. This can be in person or via phone, text, email or a combination of these, taking into consideration the injured/ill employee's preference. Contact with the injured/ill employee is to address the following:

- health and wellbeing check ins.
- what is needed for the injured/ill employee to be able to return to work.
- requests for continuous medical certificates while absent from work due to injury or illness as per the [Sick Leave Directive](#).
- review of leave balances (if no current accepted workers' compensation claim) and ensuring leave has been requested, approved by their principal/manager/supervisor and entered.
- requests for updated medical advice and discussion of rehabilitation support options.

All discussions or attempts to contact the employee must be case noted by the RRTWC and principal/manager/supervisor in [MyHR WHS](#) (DoE employees only) (save emails as attachments) or upload the [Case notes form](#).

5. Implement rehabilitation plan

The RRTWC implements the agreed rehabilitation plan for the most appropriate rehabilitation pathway:

- Recovery at work may be appropriate for employees who can work full substantive duties and hours while recovering from injury/illness, but may require minor workplace adjustments.
- Graduated return to work may be appropriate for employees with partial capacity to perform work, with restrictions to the work duties and/or work hours they can perform. These employees may require additional support from temporary workplace adjustments, temporary host work placements, temporary additional staff allocations and use of external rehabilitation providers to achieve the goal of the rehabilitation plan.

Recovery at work

Where an injured/ill employee is medically cleared to perform full duties and work hours, and requires either no workplace adjustments or minor adjustments, but is still recovering and/or receiving treatment, the RRTWC maintains contact with the employee until fully recovered and the employee provides a clearance. The RRTWC records case notes of communications in [MyHR WHS](#) (DoE employees only).

Temporary workplace adjustments

Temporary workplace adjustments are available for either full-time return to work (also known as maintain at work) and Graduated Return to Work Plans (see next section).

The RRTWC considers temporary workplace adjustments of up to 12 weeks for employees who provide current medical advice that they are able to work with some minor temporary modifications to:

- the work environment (e.g. accessibility, furniture) and/or

- work process (e.g. use of equipment, support devices, training in safe work practices) and/or
- substantive duties (not changing the inherent requirements of the role) and/or responsibilities.

When considering adjustments, the RRTWC and principal/manager/supervisor must determine that any physical or psychosocial risks in the workplace can be controlled as far as reasonably practicable to ensure health and safety for all persons in the workplace. Where there are concerns about whether it is safe or operationally reasonable to provide adjustments, the RRTWC and principal/manager/supervisor may consult with the regional SIMC. The principal/manager/supervisor confirms their final decision in case notes.

The RRTWC records the approved temporary workplace adjustments in [MyHR WHS](#) (DoE employees only), e.g. within the rehabilitation plan or case notes.

The employee, at the conclusion of the temporary workplace adjustment, provides medical advice to the RRTWC that either:

- the adjustment is no longer required or
- requests ongoing reasonable adjustments.

Requests for long term (over 12 weeks) or permanent reasonable adjustments must be assessed as per the [Reasonable adjustments procedure](#).

Graduated return to work plan (GRTWP)

If the treating medical provider advises that the employee is fit to return to work, however they have restrictions and are unable to perform all the inherent requirements of their role (duties and hours), a GRTWP may be recommended. This is also known as a suitable duties program.

The employee must notify the RRTWC and discuss the medical information required to develop a GRTWP prior to their return to the workplace.

The RRTWC:

- requests the employee to provide clear, documented medical information on their capacity to perform the inherent job requirements (use the appropriate [work capabilities checklist](#)).
- reviews the medical information provided to ensure the GRTWP meets the department's health and safety obligations (i.e. does not place the injured or ill employee, other employees, students or other people in the workplace at increased risk of injury/illness). Refer to [Guidelines for RRTWCs](#) (DoE employees only) for further detail.
- consults with the principal/manager/supervisor to assess potential workplace health and safety hazards (physical and psychological), identify suitable duties, adjustments or other supports in the workplace.
- consults with the SIMC where they have concerns about whether it is safe and operationally reasonable to provide a GRTWP prior to any return to work commencing, especially if temporary additional staffing allocation is likely to require consideration in order to support the injured/ill employee's safe return to work. Refer to [Guidelines for RRTWCs](#) (DoE employees only) for further detail.

GRTWP for employees with current accepted workers' compensation claims are prioritised.

For employees who do not have an open accepted workers' compensation claim:

- The principal/manager/supervisor and RRTWC must consider whether it is operationally reasonable for the workplace to accommodate a time limited and goal oriented GRTWP.
- The injured/ill employee must be able to perform a reasonable amount of the inherent requirements of their substantive role.
- The RRTWC must consult with the regional SIMC where they have concerns about whether it is safe and operationally reasonable to provide a GRTWP prior to any return to work being commenced, especially if temporary additional staffing allocation is likely to require consideration in order to support the injured/ill employee's safe return to work. Refer to [Guidelines for RRTWCs](#) (DoE employees only).

If a GRTWP is appropriate to offer, the RRTWC develops the GRTWP in consultation with the injured/ill employee, their treating medical provider/s and the principal/manager/supervisor. The GRTWP needs to be goal directed and time limited, with progression and planned reviews. The GRTWP is entered directly into [MyHR WHS](#) (DoE employees only) or using the [Return to work plan](#) and upload into MyHR WHS.

The following parameters must be met when developing the GRTWP:

- Sufficient medical information is available to determine a goal, timeframes, work capacity, work restrictions and risks.
- The plan must be no longer than 12 weeks in duration. If the injured/ill employee requires a longer time frame to upgrade to full hours and duties, and they do not have a current accepted workers' compensation claim, it may be appropriate to delay commencing the GRTW plan.
- The plan must include specific days and hours to be worked, and the leave type for time not to be worked.
- All restrictions and any supports must be recorded in addition to the goal of each individual GRTWP for the agreed period.
- Suitable duties must be appropriate and meaningful for employees who are unable to effectively perform the full inherent requirements of their role. For further information, see the [Guidelines for RRTWCs](#) (DoE employees only).
- Additional hours (ADO/ATO) are not worked while participating in a GRTWP. The employee must demonstrate their ability to work their substantive weekly hours and duties before accruing ADO/ATO time. Non-teaching staff in schools on an accepted workers' compensation claim and with an ADO/ATO agreement who are on a GRTWP are paid school holidays during the claim, as if they had accrued the required ADO/ATO balance. Refer to the [Guidelines for RRTWCs](#) (DoE employees only) for further detail.
- If an additional allocation of staffing is being considered to support safe return to work, the RRTWC must contact the SIMC for regional approval prior to engagement of the additional staff. Refer to the Rehabilitation additional allocations section below for further detail.

Once the GRTWP is developed, the following steps are required:

- Approval by all parties before the employee commences the GRTWP. Approvals may be recorded in emails, medical certificates/reports (WCC), in case notes of conversations or as signatures on hard copy plans ([Graduated return to work plan form](#)) and uploaded in [MyHR WHS](#) (DoE employees only).

- A copy of the GRTWP is provided to the relevant insurer (e.g. WorkCover or QSuper) by either the employee, RRTWC or CMO.
- The employee is to confirm with the RRTWC the actual days and hours worked via the weekly GRTWP timesheet generated in MyHR WHS or using a [Return to work timesheet](#). Timesheets in MyHR WHS must be completed each week to avoid pay impacts. Note: the GRTWP timesheet is in addition to the normal fortnightly timesheet completed by non-teaching staff.
- The RRTWC undertakes regular check-ins and reviews during the GRTWP. For more detail, refer to step 6 in this procedure.

Rehabilitation additional allocations (RAAs)

A rehabilitation additional allocation (RAA) is the temporary provision of an additional staff member during a GRTWP for up to 12 weeks. The additional staff funded as a RAA may:

- perform work duties that the injured/ill employee is unable to perform.
- provide assistance and support to enable the injured/ill employee to perform the inherent requirements of their role.
- enable the injured/ill employee to gradually increase their work hours and duties, as outlined in the GRTWP, while a temporary employee is present to ensure continuity of learning and safety for students.

The RRTWC must request pre-approval of RAA funding for up to 12 weeks and within the following parameters.

- School based employees – request RAA to the regional SIMC to assist an employee to safely return to work at school following an injury/illness, while ensuring the achievement of student learning outcomes in a safe and supportive work environment.
- Non-school employees – request additional funding from the manager/supervisor from within their local work unit establishment budget.

All requests for additional allocations must contribute to achieving a safe and sustainable return to work for injured/ill employees.

Employees with open accepted workers' compensation claims are given priority for RAA support, which may be extended beyond 12 weeks, where aligned with the workplace rehabilitation goal. Refer to the [Guidelines for RRTWCs](#) (DoE employees only) for further details.

Host work placement

Host work placements are guided by medical information and are temporary. There is no expectation that an injured/ill employee will be permanently moved to the host placement location. Employees on open and accepted workers' compensation claims are given priority for host work placements.

Before a temporary host work placement is considered, the following needs to occur:

- The injured/ill employee has notified the workplace issues impacting on their return to work at their substantive location and has reasonably attempted to resolve these issues locally and in line with the [Complaints and grievances management policy](#) and [procedures](#).

- Workplace issues have been appropriately investigated or explored, depending on the specific issue and relevant department policy, procedures and process.
- Detailed advice from a relevant medical specialist or allied health professional clarifies what the workplace barriers are for a return to work at the substantive workplace and how an alternative location would resolve the barriers.

The RRTWC may consider a temporary host work placement of up to 12 weeks when specialist medical or allied health professional advice indicates that an injured/ill employee is unable to undertake a return to work in their substantive position or location.

- The RRTWC discusses a temporary host work placement with the principal/manager/supervisor and contacts the region's SIMC to discuss consideration of support for the employee to safely undertake a GRTWP in an alternate location.
- The SIMC considers the medical advice and all risks and operational priorities before a temporary host work placement is negotiated. Consideration must include previous experience and transferable skills, and a review of physical and psychosocial hazards specific to the new location, such as team dynamics, workload expectations and environmental stressors.
- If a temporary host placement is not able to be provided, the employee will need to access appropriate leave with supporting medical certification. Further consideration of a temporary host placement may be given if circumstances change e.g. a suitable temporary host placement is identified, or the injured/ill employee's health improves and restrictions have reduced sufficiently to support further consideration.

The [Host work placement fact sheet](#) provides detail including the responsibilities of the hosted injured employee, host supervisor and substantive workplace supervisor.

At the conclusion of the temporary host placement, the injured/ill employee:

- provides a clearance medical certificate to return to their substantive workplace or
- requests a transfer through the standard department transfer process and applies for relevant leave whilst awaiting a transfer outcome.

Use of external rehabilitation providers

WorkCover, another insurer (e.g. QSuper) or the department may engage and fund the use of external rehabilitation and/or medical providers on a case-by-case basis to assist with complex cases.

RRTWCs must contact their region's SIMC if they identify that external rehabilitation support may be required. Refer to the [Guidelines for RRTWCs](#) (DoE employees only) for further detail about the tasks the rehabilitation provider may undertake.

SIMCs coordinate all departmental referrals to rehabilitation and medical providers (including funding requests). SIMCs must ensure that pre-approval is provided by the appropriate delegate, and compliance with [departmental procurement processes](#) (DoE employees only) and relevant supply arrangements (see [DoE supply arrangements](#) and [Workplace Health and Wellbeing Services](#)).

6. Review and monitor

During the period of an injured/ill employee's recovery and rehabilitation, the RRTWC:

- regularly monitors the progress of the injured/ill employee's recovery in relation to medical prognosis.
- identifies if return to work is not progressing in hours and/or duties towards the agreed goal of the rehabilitation plan.
- considers updated medical information on the injured/ill employee's capacity to perform the inherent requirements of the role.
- reviews whether rehabilitation goals and return to work pathways are realistic and being achieved.
- consults with the principal/manager/supervisor to ensure the workplace is managing physical and psychosocial risks that may aggravate the injured/ill employee's condition.
- updates the rehabilitation plan based on latest information.
- checks that the duties and hours recorded in the GRTWP are not aggravating the injury/illness and are leading to the fulfilment of the inherent requirements of their substantive role. If an increase in symptomology is observed or disclosed:
 - obtain updated medical advice and consider alterations to the plan, this may include [suspension/cessation](#) of the GRTWP
 - update the treating medical providers, if required (may be done with or without a voluntary medical authority). For more information refer to the [Guidelines for RRTWCs](#) (DoE employees only)
- monitors leave requests with supporting medical evidence and approvals.
- regularly informs the principal/manager/supervisor, insurer (WorkCover) or SIMC (as required for consultancy and advice) of the injured employee's progress.
- enters case notes in [MyHR WHS](#) (DoE employees only) for all communications, decisions and actions in relation to supporting an injured/ill employee.

7. Conclusion of rehabilitation

Rehabilitation concludes when the injured/ill employee reaches any of the following milestones:

- The employee resumes the full, inherent duties of their substantive position without any modifications. The employee must provide a [clearance medical certificate](#) or appropriate medical documentation (such as a workers' compensation work capacity certificate indicating return to normal duties) to the RRTWC confirming full medical clearance to perform all duties.
- The employee returns to their substantive position with medical advice that there is a requirement for permanent or long-term modifications to their work processes or work environment, acceptable to the department and the injured employee, and recorded in a [reasonable adjustment agreement](#). Refer to the [Reasonable adjustments procedure](#) for more details.
- The employee obtains a clearance medical certificate or reasonable adjustment and returns to another position through an approved internal departmental process. If a new permanent placement is required or requested by the employee, then rehabilitation may be finalised and the employee referred to Human Resources for ongoing management.

- The employee is medically unable to safely and sustainably return to work permanently or for the foreseeable future. Refer to the [Independent medical examination](#) and [Ill health retirement](#) procedures.
- The employee ceases to be employed by the department. Note that if an employee has an accepted workers' compensation claim, ongoing rehabilitation support continues until WorkCover have finalised the employee's claim, even if the employee resigns from the department.

The employee or the principal/manager/supervisor may suspend or cease rehabilitation, including a GRTWP or temporary workplace adjustments. The principal/manager/supervisor must ensure the employee has been consulted about concerns, reasonable attempts have been made to seek sufficient medical information and human rights have been considered. The [cessation of rehabilitation letter](#) should be used to guide communication with the employee. A decision to suspend or cease rehabilitation should be made in consultation with the SIMC and must reasonably be considered when:

- it is no longer operationally reasonable e.g. a longer period of recovery is required for the injured/ill employee (this means the injured/ill employee may need to access appropriate leave)
- workplace health and safety risks cannot reasonably be controlled
- the injured/ill employee does not actively participate in their rehabilitation
- the injury/ill employee does not comply with the conditions of the GRTWP and/or
- at the employee's request.

In all cases, the RRTWC ensures all documents relating to the conclusion of rehabilitation are uploaded onto [MyHR WHS](#) (DoE employees only). The rehabilitation record in MyHR WHS must be checked as finalised with the outcome recorded. The RRTWC should provide the injured/ill employee with the workplace [rehabilitation survey form](#).

8. Dispute resolution process

If an employee becomes aggrieved with decisions and actions taken during workplace rehabilitation, they should discuss this with their RRTWC or principal/manager/supervisor.

The RRTWC and principal/manager/supervisor should attempt to address the employee's concerns as early and informally as possible. If an attempt at local resolution is unsuccessful or unsuitable, the employee, RRTWC, or principal/manager/supervisor can direct concerns as per the following parameters:

- for workers' compensation matters, to the WorkCover customer adviser (or [dispute resolution](#) process).
- for income protection matters, to their insurer-appointed claims manager (e.g. QSuper or other insurer) or their dispute/complaint process.
- for departmental matters,
 - lodge a grievance about a decision, conduct or behaviour, which the employee is aggrieved by, including human rights matters, using the [Individual employee grievances procedure](#).
 - raise human resource specific questions about areas such as: awards, entitlements, transfers, Code of conduct/Standard of practice with their regional HR team.

9. Storing and releasing rehabilitation records

- Information is collected during rehabilitation and is only used for the purpose of assisting the recovery of injured/ill employees and facilitating workplace rehabilitation outcomes.
- All information collected and communications that occurred during the rehabilitation process must be recorded and stored by the RRTWC in [MyHR WHS](#) (DoE employees only).
- Due to the private and sensitive nature of information collected during rehabilitation, only rehabilitation staff can access confidential information in these records.
- Information relating to the impact of an employee's injury/illness on their work and GRTWPs may be discussed with the employee's principal/manager/supervisor or department human resources staff.
- It is an offence against the [Workers' Compensation and Rehabilitation Act 2003 \(Qld\)](#) to use or attempt to use a workers' compensation document about an employee for a purpose relating to the employment of the employee, unless the document is necessary to secure the employee's rehabilitation or return to work.

Requests for release of rehabilitation information

- The [Right to Information Act 2009 \(Qld\)](#) and [Information Privacy Act 2009 \(Qld\)](#) enable people to apply for access to documents which relate to themselves and are held by the department.
- Information may also be released when the department is authorised or required to respond to lawful requests from public authorities, including law enforcement.
- For further information on release of information, please refer to the [Administrative access to information procedure](#).

Definitions

Term	Definition
Clearance medical certificate	A clearance medical certificate is used to document that a medical practitioner believes that an employee is able to perform all of the duties of their position.
Host work placement	Host work placements are temporary placements initiated on medical advice to assist an ill or injured employee to return to work in a location other than their substantive location. These placements are only to be considered where specialist medical advice indicates that the employee is temporarily unable to safely undertake a graduated return to work in their substantive position or location.
Inherent requirements	Inherent requirements are those genuine occupational requirements, activities, conditions and practices that are essential. Some features of a position will not be inherent requirements as there are different ways of achieving the same outcome.
Medical provider	Medical providers include general practitioners, specialist doctors and allied health professionals relevant to the nature of the employee's injury/illness. Allied health

Term	Definition
	professionals include physiotherapists, occupational therapists, psychologists and speech pathologists.
Operationally reasonable	<p>Operationally reasonable decision making must consider the following factors:</p> <ul style="list-style-type: none"> • ensuring the health and safety of all persons in the workplace as far as reasonably practicable, • appropriate use of public funds and resources, • compliance with the Code of Conduct for the Queensland Public Service, • delivery of education services and the good working order of schools and • human rights of all relevant persons.
Reasonable adjustment	<p>A reasonable adjustment is where adjustments are made to a position, an employment practice, the workplace or work-related environment to ensure equal opportunity for people with a medical condition or disability to perform the inherent requirements of the position without imposing unjustifiable hardship on the organisation. Some injured/ill staff may need reasonable adjustments to enable their participation in workplace rehabilitation. See Reasonable adjustments procedure.</p>
Rehabilitation additional allocation	<p>A rehabilitation additional allocation is the provision of a temporary additional staff member for finite periods to a school (or work unit) to assist an employee with a medical condition undertake a graduated return to work plan or temporary workplace adjustment. This will depend on the support required for the medical condition, the operational needs of the school or work unit and is coordinated through the regional SIMC.</p>
Rehabilitation plan	<p>A rehabilitation plan is an over-arching plan outlining the rehabilitation objectives and the steps required to enable the employee to return to work.</p>
Rehabilitation staff	<p>Individuals assigned to perform the Rehabilitation and Return to Work Coordinator role or employed as Senior Injury Management Consultants or Claims Management Officers. Includes department staff with rehabilitation work tasks specified in their role description.</p>
Suitable duties	<p>Schools and work units must provide meaningful productive work for employees with an accepted WorkCover claim (and may be provided for non-work-related injury/illness), who would otherwise be unable to effectively perform their usual duties as a result of their injury/illness. Suitable duties are temporary in nature and form part of a graduated return to work plan.</p>
Voluntary medical authority	<p>A voluntary medical authority is an employee's written approval for the RRTWC or SIMC to contact treating medical practitioners and health care providers in order to</p>

Term	Definition
	obtain and discuss information about an employee's current injury or illness for the purposes of a workplace rehabilitation program.
Workers' compensation	Employees who sustain a work-related injury or illness can lodge a workers' compensation claim for costs, including medical, hospital, rehabilitation, wages and lump sum payments. WorkCover Queensland is the insurer that assesses all claims for compensation, in accordance with the Workers' Compensation and Rehabilitation Act 2003 (Qld) and Regulation .
Workplace rehabilitation	Workplace rehabilitation is a coordinated process undertaken by an employer, in collaboration with the employee, their medical providers and their workplace, to assist the employee to return to work in a timely manner or safely maintain their attendance at work following an injury or illness.

Legislation

- [Anti-Discrimination Act 1991 \(Qld\)](#) Chapter 1 section 5, Chapter 2 Part 4, sections 35 and 36
- [Code of Practice: How to manage work health and safety risks \(2021\)](#)
- [Code of Practice: Managing the risk of psychosocial hazards at work \(2022\)](#)
- [Directive 04/24 – Sick Leave](#)
- [Human Rights Act 2019 \(Qld\)](#)
- [Information Privacy Act 2009 \(Qld\)](#)
- [Public Sector Act 2022 \(Qld\)](#) Chapter 3, Part 8
- [Public Service Regulation 2018 \(Qld\)](#) Part 3, Division 1
- [Right to Information Act 2009 \(Qld\)](#)
- [Work Health and Safety Act 2011 \(Qld\)](#)
- [Workers' Compensation and Rehabilitation Act 2003 \(Qld\)](#) Chapter 1 part 4 divisions 2, 6 and 7, Chapter 3, Chapter 4, Chapter 13, Chapter 14 Part 1 and Schedule 6
- [Workers' Compensation and Rehabilitation Regulation 2025 \(Qld\)](#) Parts 4 and 5

Delegations/Authorisations

- [Human Resources delegations](#) (DoE employees only)

Policies and procedures in this group

- Nil

Supporting information for this procedure

- [Initial interview checklist](#)
- [Initial interview form](#)
- [Voluntary medical authority](#)
- [Introduction to doctor letter](#)
- [Case note form](#)
- [Rehabilitation plan](#)
- [Host work placement fact sheet](#)
- [Clearance medical certificate](#)
- [Cessation of rehabilitation letter](#)
- [Workplace rehabilitation survey](#)

Other resources

- [Graduated return to work plan](#)
- [Graduated return to work timesheet](#)
- [Administrative access to information procedure](#)
- [Creating Healthier Workplaces – Injury management](#)
- [Departmental RRTWC online course](#) (DoE employees only)
- [Guidelines for standard for rehabilitation](#)
- [Health, safety and wellbeing incident management procedure](#)
- [Independent medical examinations procedure](#)
- [Ill health retirement procedure](#)
- [MyHR WHS system](#) (DoE employees only)
- [Reasonable adjustments procedure](#)
- [Queensland Public Service Code of Conduct](#)
- [Queensland Government Records Governance Policy](#)
- [Work capabilities checklists](#)

Contact

For further information, please contact:

Health, Safety and Wellbeing Unit

Email: InjuryManagement@qed.qld.gov.au

Review date

20/04/2029

Superseded versions

Previous seven years shown. Minor version updates not included.

4.0 Workplace rehabilitation procedure

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Effective 20 April 2026

Author usercode
File number
Directorate/Branch/School
Phone extension

<Date>

Mr/Mrs/Ms <Fullname>

<Address>

<Suburb> QLD <postcode>

Dear Mr/Mrs/Ms <Surname>

I understand that you have been receiving support from the <workplace/school> and <region> to safely return to meaningful work, as part of a workplace rehabilitation program for a non-work related injury or illness.

My preliminary decision

The Department of Education (the department) has a duty of care to ensure the health and safety of all employees, students and other persons in its workplaces under the [Work Health and Safety Act 2011 \(Qld\)](#). To ensure the department meets this obligation, I have made the preliminary decision to cease your workplace rehabilitation program, in accordance with the department's [Workplace rehabilitation procedure](#).

The reasons for my preliminary decision are outlined below.

The Workplace rehabilitation procedure states that the department may provide workplace rehabilitation to employees without a current accepted workers' compensation claim to return to work, where this is operationally reasonable.

The procedure provides the following definition of operationally reasonable:

Operationally reasonable decision making must consider the following factors:

- *ensuring the health and safety of all persons in the workplace as far as reasonably practicable,*
- *appropriate use of public funds and resources,*
- *compliance with the Code of Conduct for the Queensland Public Service,*
- *delivery of education services and the good working order of schools and*
- *human rights of all relevant persons.*

The procedure further outlines the following circumstances for ceasing workplace rehabilitation:

- *it is no longer operationally reasonable e.g. a longer period of recovery is required for the injured/ill employee (this means*

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30 Mary Street Brisbane 4000
PO Box 15033 City East
Queensland 4002 Australia
Telephone xxx xxxx xxx
Website www.qed.qld.gov.au
ABN 76 337 613 647

the injured/ill employee may need to access appropriate leave)

- *workplace health and safety risks cannot reasonably be controlled*
- *the injured/ill employee does not actively participate in their rehabilitation*
- *the injury/ill employee does not comply with the conditions of the GRTW.*

Relevant facts and background

The support provided to you under your current rehabilitation program included **<provide as much information as possible>**.

Your graduated return to work program was commenced on the medical advice of **<Dr Name>** who advised that there were no restrictions to your daily workplace activities as a **<role title>** Or **<Dr Name>** advised that there were some restrictions requiring workplace adjustments as part of the return to work program: **<insert details>**

In terms of support, the school has provided the following **<pick the appropriate options and provide further detail where appropriate>**:

- maintained regular contact with you whilst on leave from the workplace
- in consultation with you, arranged all appropriate leave to avoid an over/under payment from your insurer
- in line with the medical information provided by (Dr Name), supported you on workplace rehabilitation plan/s (date/s) that have been unsuccessful to date
- appropriate workplace reasonable adjustments where required
- rehabilitation additional allocation (funding for your rehabilitation plan)
- early intervention program / external rehabilitation provider
- worksite ergonomic assessment by an external provider
- reminders about the employee assistance program
- weekly / fortnightly review meetings
- provided information on the dispute resolution process to lodge a complaint or individual employee grievance

Concerns raised with you in relation to your current rehabilitation program include **<provide as much information as possible>**.

Since commencing your rehabilitation program on **<insert date/s>** concerns have been raised with you by **<insert name of person/s>** about your interactions and your inability to fully engage with the program to demonstrate the full inherent requirements of your role **<all previous engagement with the employee should be accurately reflected in the letter>**. As a result, a meeting was held on:

- **<date and time of meeting/s with who, specific concerns raised and outcome/s, your support person was (name of support person)>**.
- **<summarise meeting discussion including pertinent aspects/responses from the employee>**
<insert a summary of what applies to the case, 'On XX you did...' and relate to the relevant circumstances in the Workplace rehabilitation procedure>.
 - ***it is no longer operationally reasonable e.g. a longer period of recovery is required for the injured/ill employee (this means the injured/ill employee may need to access appropriate leave)***

- workplace health and safety risks cannot reasonably be controlled
- the injured/ill employee does not actively participate in their rehabilitation
- the injury/ill employee does not comply with the conditions of the GRTW.

Reasons for my preliminary decision

Therefore, I have made the preliminary decision to cease your rehabilitation program based on your non-compliance with your obligations under the department's WR procedure, specifically <these reasons will be specific to your particular case/employee but some examples might include>:

- Why is it no longer operationally reasonable to continue rehabilitation?
- In what ways are they not actively participating in the current RTW plan?
- In what ways are they not complying with the medical treatment?
- What workplace health and safety risks cannot be reasonably controlled?

Your human rights

The [Human Rights Act 2019 \(Qld\)](#) sets out that a decision-maker has an obligation to act and make decisions in a way that is compatible with your human rights, and to give proper consideration to your human rights.

With regard to the *Human Rights Act 2019* (Qld), it is considered that the human rights in sections 15, 23, 25 and 26 may be affected by the decision to cease your workplace rehabilitation program.

I confirm that I have considered the potential impact of my preliminary decision on your human rights, however, I have determined there is no less restrictive and reasonably available way to achieve the purpose of appropriately addressing the risk to staff, students and the department associated with the concerns raised.

Next steps

In accordance with the principles of natural justice, I am providing you with an opportunity to respond to my preliminary decision by way of a written response within **seven (7) days** of receipt of this correspondence to notify why the above decision should not be taken. Please ensure that any documents you rely upon are attached.

After this time, I will consider your written response and make a final decision in relation to your current rehabilitation program. In terms of the principles of natural justice, no final decision has yet been made, or will be made, until you have had the opportunity to respond.

If you do not respond, or if your response is received later than **seven (7) days** from the receipt of this letter, I will make a final decision based on the material that is currently before me to confirm my decision to cease your current rehabilitation program.

Accordingly, you are invited to attend a meeting at <name of school/region> on <date / time> with <insert name/s> to discuss your circumstances and determine an appropriate course of action. If you wish to attend this meeting with a support person, please email <contact officer's name> with confirmation of your attendance by <date>.

Employee Assistant Program

The department's Employee Assistance Service, TELUS Health, offers free, confidential counselling to all departmental employees and you may wish to access this service. To make an initial appointment please contact TELUS Health by telephone on 1800 604 640.

Avenues for review

Should you be dissatisfied with my decision, because you believe it is unfair and unreasonable, you may be able to refer your concern for review. Avenues for review may include, but are not limited to lodging an individual employee grievance.

You may also seek external review to the [Queensland Industrial Relations Commission](#) or to the [Queensland Human Rights Commission](#).

If you have any questions in relation to this correspondence, please contact <Name, Role> on telephone <phone number> or by email to <email address>.

Yours sincerely

<Name>
<Role title e.g. Principal, Manager, Regional HR Director>
<School/work unit/region>

Effective 20 April 2026

Initial interview checklist

Action Required: To be used by the Rehabilitation and Return to Work Coordinator during the initial interview with an injured or ill employee as a prompt to ensure key issues are discussed at this time.

Interview Date: / /

EMPLOYEE DETAILS

- Name
- Position title
- Duties before injury
- Working location
- Preferred communication method and contact details
- Role of the Rehabilitation and Return to Work Coordinator discussed
- Rehabilitation process outlined (including employee's rights and responsibilities)

INJURY/ILLNESS DETAILS

- Diagnosis
- History of injury/illness
- Treatment
- Name of medical provider/s
- Prognosis
- Impact of injury/illness upon ability to work (including limitations/restrictions/barriers/H&S risks)
- Voluntary Medical Authority form provided

WORKCOVER / QSUPER / LEAVE

- WorkCover claim process discussed (if relevant)
- Income protection claim (e.g. QSuper) process discussed (if relevant)
- Leave balances and options discussed

Uncontrolled copy. Refer to the Department of Education Policy and Procedure Register at <https://ppr.ged.qld.gov.au/pp/workplace-rehabilitation-procedure> to ensure you have the most current version of this document.

RETURN TO WORK DETAILS

- Rehabilitation goal set
- Return to work options discussed
- Actions to achieve rehabilitation goal discussed
- Rehabilitation plan outline developed
- Return to work plan discussed

FINANCIAL DETAILS:

Leave funded by: WorkCover QSuper Sick Leave Other _____

ACTIONS ARISING OUT OF INTERVIEW:

- Actions for employee following interview confirmed
- Actions for Rehabilitation and Return to Work Coordinator following interview confirmed

Initial interview

Privacy Notice: The Department of Education (the department) is collecting information on the below employee's health and its impact on work in accordance with the department's Workplace rehabilitation procedure, to support the provision of reasonable workplace rehabilitation. The information will be accessed by a Rehabilitation and Return to Work Coordinator to facilitate the employee's workplace rehabilitation. Some of this information may be given to WorkCover Queensland, QSuper or other insurer, a treating doctor or allied health professional or a doctor appointed by the department for the purpose of informing rehabilitation options. Information relevant to the impact of an injury/illness upon an employee's work may be discussed with a supervisor for the purpose of identifying rehabilitation options, and managing workplace health and safety risks. Information may also be discussed with regional or central office Injury Management and Human Resources employees. The employee's information will not be given to any other person or agency unless the employee has given their consent or the department is authorised or required by law.

Action required: To be completed by the Rehabilitation and Return to Work Coordinator during the initial conversation with an injured or ill employee to ensure key issues are discussed at this time.

Employee details

Name:	Conversation date:
Working location:	Position title:
	Phone (work):
Email:	Phone (personal):

Duties before injury:

- Role of Rehabilitation and Return to Work Coordinator discussed
 Rehabilitation process outlined (including employee's rights and responsibilities)

Injury/illness and medical providers

Diagnosis:

History of injury/illness:

Treatment:

Name and contact details of medical providers (GP, Specialist and/or Allied Health/Rehabilitation Provider):

Uncontrolled copy. Refer to the Department of Education Policy and Procedure Register at <https://ppr.qed.qld.gov.au/pp/workplace-rehabilitation-procedure> to ensure you have the most current version of this document.

Prognosis:

Impact of injury/illness upon ability to work (including limitations/restrictions/barriers/health and safety risks):

Other information/comments:

Voluntary Medical Authority form provided and discussed:

WorkCover / QSuper (or other insurer) / Leave

- WorkCover claim process discussed (if relevant)
- Income protection claim (e.g. QSuper or other insurer) process discussed (if relevant)
- Leave balances and options discussed

Other information/comments (including claim/application details and contacts):

Return to work details

Rehabilitation goal:

Return to work options discussed:

Actions to achieve rehabilitation goal:

Other information/comments:

- Rehabilitation plan developed
- Return to work plan developed

Financial details:

Leave funded by: WorkCover QSuper Sick Leave Other _____

Actions arising out of conversation:

Actions for employee following conversation:

Actions for Rehabilitation and Return to Work Coordinator following conversation:

Other notes/comments:

Signature:

Name of Rehabilitation & Return to Work Coordinator: _____

Signature of Rehabilitation & Return to Work Coordinator: _____

Date: ___ / ___ / _____

Voluntary Medical Authority

As set out in the Department of Education’s (the department) [Workplace Rehabilitation procedure](#) and the *Information Privacy Act 2009*, your Rehabilitation and Return to Work Coordinator needs your consent for your treating medical practitioners, health care providers and relevant insurers (e.g. WorkCover and QSuper) to provide and discuss medical information about your current injury/illness, for the purposes of your workplace rehabilitation program. The information may include sensitive or confidential health information relevant to your capacity to work.

The information will only be used for the purpose of your workplace rehabilitation. Workplace rehabilitation focuses on your return to work and emphasises interventions, including modified hours, duties or relocation, aimed at maintaining you within the workplace or assisting your return to other appropriate employment. If you are unable to return to your substantive position, transfer, redeployment or ill health retirement may be considered by the department as part of your workplace rehabilitation.

The information will be maintained in confidence and stored securely. With your consent, the Rehabilitation and Return to Work Coordinator may disclose information to your treating medical practitioners and external rehabilitation providers involved in your workplace rehabilitation.

However, the information may be disclosed by the Rehabilitation and Return to Work Coordinator without your consent where authorised or required by law. This may include disclosure to WorkCover, QSuper (or other insurer) or doctors appointed by the department for the purposes of advising the department in relation to rehabilitation, transfer, redeployment or ill health retirement.

Additionally, information relevant to the impact that your injury/illness has upon your work may be discussed confidentially with your workplace supervisors, regional or central office Injury Management or Human Resources employees without your consent for the purpose of identifying rehabilitation options, and managing workplace health and safety risks.

Authority

Please tick the boxes below as appropriate to indicate whether you consent to the listed activity in relation to information (which may include sensitive or confidential health information) relevant to your current illness/injury (*‘your information’*) for the purpose of your workplace rehabilitation.

Activity	Yes	No	Not Applicable
Do you consent to WorkCover disclosing your information to the department’s appointed Rehabilitation and Return to Work Coordinator?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you consent to QSuper (or other insurer) disclosing your information to the department’s appointed Rehabilitation and Return to Work Coordinator?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you consent to the medical and health care providers listed in the attached Schedule disclosing your information to the department’s appointed Rehabilitation and Return to Work Coordinator?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you consent to the Rehabilitation and Return to Work Coordinator disclosing your information to treating medical practitioners and external rehabilitation providers involved in your workplace rehabilitation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Signatures

Employee: _____ Witness: _____

Name (please print): _____ Name (please print): _____

Date: ___/___/_____ Date: ___/___/_____

Uncontrolled copy. Refer to the Department of Education Policy and Procedure Register at <https://ppr.qed.qld.gov.au/pp/workplace-rehabilitation-procedure> to ensure you have the most current version of this document.

Schedule: Medical authority

(Refer to privacy information in the Voluntary medical authority form.)

Authority

I authorise the medical practitioners and health care providers listed below to disclose information (which may include sensitive or confidential health information) relevant to my current illness/injury to the appointed Rehabilitation and Return to Work Coordinator of the Department of Education.

Note: The range of health care providers may include, but is not limited to medical specialists, allied health professionals and therapists. If insufficient room, attach another page and ensure that it is signed and witnessed as below.

Medical Practitioner	Address	Telephone

Signatures

Employee: _____ Witness: _____

Name (please print): _____ Name (please print): _____

Date: ___ / ___ / ___ Date: ___ / ___ / ___

For further information about your privacy and the rehabilitation process, please refer to the [Workplace rehabilitation procedure](#).

Author usercode
File number
Directorate/Branch/School
Phone extension

<Date>

Dr <Name>
<Medical practice name>
<Number> <Street>
<City/Suburb> <State> <Postcode>

Dear Dr

Re: <Employee's name>
D.O.B.: / /
Occupation: <Role title>

I am a Rehabilitation and Return to Work Coordinator working for the Department of Education (the department).

As you would be aware, research shows that extended time off work can result in adverse physical, psychological, social and financial impacts, and that health outcomes are much improved if injured employees can remain at work during recovery.

Consistent with this research, the department is committed to providing workplace rehabilitation to promote safe and timely return to work for employees with injury and illness.

To assist with recovery of our valued employee and to help inform your assessment of their fitness for work, I have attached:

- a role description relevant to the employee's job within the department
- a work capabilities checklist to guide your advice on the employee's capacity for work
- a voluntary medical authority form signed by the employee to authorise you to communicate information.

The department provides workplace rehabilitation guided by medical advice and workplace options that are operationally reasonable. Rehabilitation may include temporarily modifying hours, duties or work location until the employee is able to safely return to their pre-injury work.

Further information about the department's rehabilitation procedure can be found on our website at <https://ppr.qed.qld.gov.au/pp/workplace-rehabilitation-procedure>.

I welcome your support to assist our employee in their recovery and return to work.

Yours sincerely

<Name of Rehabilitation and Return to Work Coordinator>
Rehabilitation and Return to Work Coordinator
<School/Location>
<Telephone>
<Email>

Education House
30 Mary Street Brisbane 4000
PO Box 15033 City East
Queensland 4002 Australia
Telephone xxx xxxx xxx
Website www.qed.qld.gov.au
ABN 76 337 613 647

Rehabilitation Plan

Privacy Notice: The Department of Education (the department) is using information on the below employee's health and its impact on work in accordance with the department's [Workplace rehabilitation procedure](#), to support the provision of a workplace rehabilitation program. The information will be accessed by a Rehabilitation and Return to Work Coordinator, to facilitate the employee's workplace rehabilitation. Some of this information may be given to WorkCover Queensland, QSuper or other insurer, a treating doctor or allied health professional or a doctor appointed by the department for the purpose of informing rehabilitation options. Information relevant to the impact of an injury/illness upon an employee's work may be discussed with a supervisor for the purpose of identifying or amending rehabilitation options, and managing workplace health and safety risks. Information may also be discussed with regional or central office Injury Management and Human Resources employees. The employee's information will not be given to any other person or agency unless the employee has given their consent or the department is authorised or required by law.

Employee name:
School / workplace:
Rehabilitation goal:
Review date:

OBJECTIVE/ACTION	RESPONSIBILITY	TIMEFRAME	COMPLETED

INFORMATION PROVIDED/DISCUSSED

RESPONSIBILITIES		LEAVE CHECKLIST		
Employee	RRTWC	Sick Leave	WorkCover	Income protection (QSuper)
<input type="checkbox"/> Medical Certificates <input type="checkbox"/> Leave applications <input type="checkbox"/> Supervisor contact	<input type="checkbox"/> Medical authority <input type="checkbox"/> Treating doctor contact <input type="checkbox"/> Supervisor contact	<input type="checkbox"/> Leave balance <input type="checkbox"/> Meritorious sick leave <input type="checkbox"/> Other leave balances <input type="checkbox"/> Return to work plan	<input type="checkbox"/> Eligibility <input type="checkbox"/> Assignee pay <input type="checkbox"/> RTW plan <input type="checkbox"/> 26 week impact <input type="checkbox"/> Declare other work	<input type="checkbox"/> Sick leave balance <input type="checkbox"/> Wait period <input type="checkbox"/> Completed application <input type="checkbox"/> RTW plan
Employee signature:	Rehabilitation and Return to Work Coordinator (RRTWC) signature:			
Date:	Date:			

Uncontrolled copy. Refer to the Department of Education Policy and Procedure Register at <https://ppr.qed.qld.gov.au/pp/workplace-rehabilitation-procedure> to ensure you have the most current version of this document.

Clearance medical certificate

Privacy notice: the Department of Education is collecting information on the below employee's health and its impact on work in accordance with the department's Workplace Rehabilitation procedure, to support the provision of a workplace rehabilitation program. The information will be accessed by a Rehabilitation and Return to Work Coordinator to facilitate the employee's workplace rehabilitation. Some of this information may be given to WorkCover Qld, QSuper, a treating doctor or allied health professional or a doctor appointed by the department for the purpose of informing rehabilitation options. Information relevant to the impact of an injury/illness upon an employee's work may be discussed with a supervisor for the purposes of identifying rehabilitation options, and managing workplace health and safety risks. Information may also be discussed with regional or central Injury Management and Human Resources employees. An employee's information will not be given to any other person or agency unless authorised by the employee or required by law.

Action required: to be completed by the treating medical practitioner, in consultation with the Rehabilitation and Return to Work Coordinator and the employee at the end of the workplace rehabilitation process.

Employee details

Name: _____ DOB: ____/____/____

Injury diagnosis or nature: _____

Type of clearance

- Employee is fully cleared to return to work, performing their usual duties and hours, from ____/____/____
- Employee is cleared to return to work from ____/____/____. No permanent disability exists, however the following restrictions, modifications or supports should be considered to prevent a further injury:

- Employee is cleared to return to work from ____/____/____. The employee has a permanent disability and the impact of this disability on their employment is:

The following permanent restrictions, modifications or supports are required to assist the employee to perform their duties and to prevent a further injury:

Comments

Medical practitioner's details

Signature: _____ Date: ____/____/____

Name: _____

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Workplace rehabilitation survey

School/Workplace: _____ Date: ____ / ____ / ____

Rehabilitation and Return to Work Coordinator (please circle): Region Central office School

Injury type (please circle): Physical Psychological Other

Nature of injury or illness: Work related Non-work related

In response to the following statements, please circle the number that describes your opinion. Please add further comments at the end of the survey.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
Before I participated in rehabilitation, I was aware that workplace rehabilitation was available for both work and non-work related injuries or illnesses.	1	2	3	4	5
The length of time between when my injury/illness was reported and when my Rehabilitation and Return to Work Coordinator first contacted me was reasonable. If possible, please specify the length of time it was before the Rehabilitation & Return to Work Coordinator initiated contact with you: _____	1	2	3	4	5
I am satisfied with the level of confidentiality provided by the Rehabilitation & Return to Work Coordinator	1	2	3	4	5
When I could not perform my usual duties, my Rehabilitation and Return to Work Coordinator was helpful and supportive in providing/discussing options for alternative duties, locations or hours of work.	1	2	3	4	5
Workplace rehabilitation was beneficial and suitable to my needs.	1	2	3	4	5

Comments: _____

Thank you for taking the time to complete this survey.

Please email your completed survey to InjuryManagement@qed.qld.gov.au

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Workplace rehabilitation

Host Work Placements

Host work placements provide temporary assistance for an ill or injured employee to return to work in a location other than their substantive position, where medical advice indicates that the employee is medically unable to undertake a return to work in their substantive location.

Host work placements are temporary to support an employee's recovery and there are no expectations that the host work placement school or work unit will be required to permanently take on the injured employee.

Host Supervisor

The host work placement supervisor has the responsibility for day-to-day supervision of the host employee, which includes:

- Provide a local workplace induction to the host employee.
- Provide details and direction to the host employee of host work duties and performance expectations.
- Monitor performance and provide timely feedback to the host employee and the Rehabilitation and Return to Work Coordinator (RRTWC).
- Monitor attendance and sign timesheets to confirm hours worked according to the Return to Work Plan.
- Document performance or attendance feedback.
- Advise the RRTWC of any health related or attendance issues with the host employee and the impact of the host employee in the workplace.

Host Employee

The host employee reports to the host supervisor for the duration of the host work placement for all work-related matters, including:

- Clarification of host work duties and performance expectations.
- Submitting applications for leave, including ADO, Recreation, Sick and Long Service Leave.

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- Notifying the host work placement supervisor and RRTWC of any health-related issues or impacts on the host work placement.
- Participating in host work placement activities e.g. team meetings, professional development or work observations.
- Notifying the host work placement supervisor of any unscheduled absences.

Substantive Workplace Supervisor

- Ensure the region has approved Rehabilitation Additional Allocation funding for the host work placement. (for school-based employees)
- Continue to pay the salary of the employee for the duration of the host work placement. (for central/regional office-based employees)
- Liaise with the host work placement supervisor and RRTWC as required to support recovery and improvement of work capacity towards return to pre-injury work hours, duties and location.

Further information

Further information is available in the [Workplace rehabilitation procedure](#).